



Attorney's Docket No.: 42390.P14874

Patent

In re the Application of: Sell et al.
(inventor(s))

Application No.: 09/900,423

Filed: July 6, 2001

For: HERMETICALLY SEALED EXTERNAL CAVITY LASER SYSTEM AND METHOD
(title)

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SIR: Transmitted herewith is a **Response After Final Action** for the above application.

- Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established by a verified statement previously submitted.
 A verified statement to establish small entity status under 37 C.F.R. §§ 1.9 and 1.27 is enclosed.
 No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)		SMALL ENTITY	OTHER THAN A SMALL ENTITY
Total Claims	* 36	Minus	** 38	0		X9 \$	X18 \$ 0
Indep. Claims	* 4	Minus	*** 4			X42 \$	X84 \$ 0
First Presentation of Multiple Dependent Claim(s)							
					Total Add. Fee	\$	+280 \$

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to Mail Stop AF, Commissioner for Patents, Box 1450, Alexandria, VA 22313-1450

on May 29, 2003
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Luci M. Arevalo

Name of Person Mailing Correspondence

Signature

May 29, 2003
Date

A check in the amount of \$ _____ is attached for presentation of additional claim(s).
 Applicant(s) hereby Petition(s) for an Extension of Time of _____ month(s) pursuant to
37 C.F.R. § 1.136(a).

A check for \$ _____ is attached for processing fees under 37 C.F.R. § 1.17.
Please charge my Deposit Account No. 02-2666 the amount of \$ _____.

A duplicate copy of this sheet is enclosed.

The Commissioner of Patents and Trademarks is hereby authorized to charge payment of the
following fees associated with this communication or credit any overpayment to Deposit Account
No. 02-2666 (**a duplicate copy of this sheet is enclosed**):

- Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of
extra claims.
 Any extension or petition fees under 37 C.F.R. § 1.17.

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP



Cory G. Claassen
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Date: May 29, 2003

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Examiner: Vy, Hung T.

Art Unit: 2828

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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Daron

RESPONSE AFTER FINAL

Sir:

In response to the Office Action mailed March 31, 2003, Applicants respectfully request the Examiner to enter the following amendments and consider the following remarks.

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